1996;

(c) if so, whether the registration of children in Middle and High Schools of Karma is likely to be re-opened; and

(d) if not, the reasons therefor ?

THE MINISTER OF STATE OF THE MINISTRY OF LABOUR (SHRI M.P. VEERENDRA KUMAR) : (a) The Labour Welfare Organisation of the Ministry of Labour runs one Middle School and one High School in Karma, Bihar.

(b) to (d) These schools set up and financed out of Mica Mines Labour Welfare Fund are basically meant for wards of mica mine workers. Because of significant reduction in mica mining activity and closure of many mica mines, the wards of mica mine workers studying in these schools have reduced considerably and now constitute only 3% of the total strength of students. Accruals to the fund are also declining rapidly and they are not meant to be utilized for financing educational facilities for general public. Offer was made to the Government of Bihar to hand over the schools and other institutions to the State Government but has not elicited any positive response so far. Fresh admissions in these schools have been stopped since the academic session 1996-97.

[English]

World Bank Assistance for Secondary Health System

2280. SHRI N.S.V. CHITTHAN:
SHRI K.P. SINGH DEO:

Will the PRIME MINISTER be pleased to state:

(a) whether the State Governments of Tamil Nadu and Orissa have submitted any proposals seeking World Bank Assistance for revamping and upgradation of Secondary Health System;

(b) if so, the details thereof;

(c) whether their projects have been forwarded to the World Bank;

(d) if so, whether the World Bank officials had visited the States and found the projects feasible and agreed to fund the projects; and

(e) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) to (e) Proposals have been received from State Governments of Tamil Nadu and Orissa seeking World Bank assistance for revamping and upgrading the Secondary Health System in their respective States. The proposal received from Orissa Govt. has been posed for external assistance to the World Bank.

The process of obtaining World Bank assistance as per their procedures taken around eighteen to twenty four months, based on the capacity of the States to design and formulate the projects within the ambit of the requirements of the external agency. For formulation of projects, World Bank Missions also visit the concerned States. It is not possible to comments on the final dimension of the projects at this juncture.

Employees Provident Fund Scheme

2281. SHRI ANNASAHIB M.K. PATIL: Will the Minister of LABOUR be pleased to state:

(a) whether the Government have formulated any scheme to make the employees Provident Fund Scheme more effective and attractive for employees; and

(b) if so, the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF LABOUR (SHRI M.P. VEERENDRA KUMAR): (a) and (b) At present under the Employees' Provident Fund Scheme, 1952 the minimum rate of provident fund contribution is 8.33% and maximum rate is 10% of the monthly wage. In order to make the scheme more atractive the Government has decided to enhance the minimum rate of PF contribution from 8.33% to 10% and the maximum rate from 10% to 12% of the monthly wage.

Calcutta Metro Project

2282. SHRI T. GOPAL KRISHNA : Will the Minister of URBAN AFFAIRS AND EMPLOYMENT be pleased to state:

(a) the progress of residual work made in Calcutta Metro Project; and

(b) the target date fixed for completion of the Project?

MINISTER OF STATE OF THE MINISTRY OF URBAN AFFAIRS AND EMPLOYMENT (DR. U. VENKATESWARLU) : (a) and (b) The Calcutta Metro Rail Project is under implementation by the Ministry of Railways. Ministry of Railways have intimated that 99.86% of the work has been completed upto May, 1997, It has further been intimated that the target date for completion of the project is June, 1998.

[English]

AIDS Testing Facility

2283. SHRI JAGAT VIR SINGH DRONA: Will the PRIME MINISTER be pleased to state:

(a) whether a large number of AIDS patients, most of whom belong to socially and economically lower sections of society, are migrating from Mumbai to Kanpur in Uttar Pradesh thereby causing much concern to the medical administration;

(b) the names of places where AIDS testing facilities are available in Uttar Pradesh;

(c) whether there is no AIDS testing facility at Kanpur city;

(d) if so; whether the Government propose to provide AIDS testing facility in the said city and the time by which this facility is likely to be provided; and

(e) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) to (e) The information is being collected from the State Government of Uttar Pradesh and will be placed on the table of the Lok Sabha.

[English]

Birth/Death Rate

2284. SHRI MAHENDRA SINGH BHATI: Will the PRIME MINISTER be pleased to state:

(a) the average birth and death rates in the country, State/Union Territory-wise;

(b) whether the death rate in India is very high as compared to other countries;

(c) if so, the reasons therefor; and

(d) the steps taken/proposed to be taken by the Government to remedy the situation?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY) : (a) A Statement showing Birth and Death Rates from Sample Registration System (SRS) for the year 1995 is enclosed.

(b) No, Sir. According to the estimates published by UNFPA in "State of World Population" the Death Rate for India during 1990-95 is 10 (per 1000 population) which is higher than neighbouring countries China, Thailand, Indonesia, Korea and Sri Lanka. However, the Death Rate for the more developed regions is same as that of India for the same period.

(c) and (d) Although the death rate has declined, health services are being provided through a large net work of Primary Health Centres/Sub-centres/Government Hospitals in addition to involvement of NGOs and Private Hospital set up. Various programmes for the family welfare have been integrated into one integrated programme designated "Reproductive & Child Health" and under this programme the range and quality of health care would be improved during the IX Plan. This is expected to further lower the death rate in the country.

Statement

Birth Rates & Death Rates-1995

Sl. No.	State/UT	Crude Birth Rate	Crude Death Rate
1	2	3	4
INDIA		28.3#	9.0
I. MAJOR STATES			
1.	Andhra Pr.	24.2	8.4
2.	Assam	29.3	9.6
3.	Bihar	32.1	10.5
4.	Gujarat	26.7	7.6
5.	Haryana	29.9	8.1
6.	Karnataka	24.1	7.6
7.	Kerala	18.0	6.0
8.	Madhya Pr.	33.2	11.2
9.	Maharashtra	24.5	7.5
10.	Orissa	27.8	10.8
11.	Punjab	24.6	7.3
12.	Rajasthan	33.3	9.1
13.	Tamil Nadu	20.3	8.0
14.	Uttar Pr.	34.8	10.3
15.	West Bengal	23.6	7.9
II. SMALLER STATES			
1.	Arunachal Pr.	23.8	6.0
2.	Delhi	23.3	6.0
3.	Goa	14.7	7.5
4.	Himachal Pr.	25.2	8.7
5.	J & K	NA	NA
6.	Manipur	20.6	6.7
7.	Meghalaya	29.0	8.9
8.	Mizoram	NA	NA
9.	Nagaland	NA	NA